

**CLAIMS ONLY**

Application Number

10698436

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
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50						
Total Indep						
Total Depend						
Total Claims						

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Total Indep						
Total Depend						
Total Claims						

CLAIMS ONLY						Application Number <u>10/698436</u>	Filing Date
						Applicant(s)	
* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
101							
102							
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49							
50							
Total Indep	2						
Total Depend	13						
Total Claims	17						